



September 26, 2011

**VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

**LINDA KIMBERLY
REGIONAL GENERAL MANAGER
CHARTER COMM-OKANOGAN
222 NE PARK PLAZA DR STE 23
VANCOUVER , WA 98684**

Re: 2011 Three-Year Election for Retransmission Consent

Dear LINDA KIMBERLY,

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station KLEW-TV, LEWISTON, ID (the "Station") elects to require CHARTER COMM-OKANOGAN, which serves the community(ies) and/or county(ies) and unincorporated areas within those community(ies) and county(ies) listed on the enclosed 2011 Cable Retransmission Consent Election Statement, to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2012, through December 31, 2014. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed Election Statement.

Fisher Communications will provide under separate cover a retransmission consent agreement to cover the election period of January 1, 2012 through December 31, 2014 to you shortly. If you already have a retransmission consent agreement with the Station or with Fisher Communications, Inc. or a subsidiary thereof that covers the Station for all or a portion of the January 1, 2012, through December 31, 2014, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2014, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if such an agreement contains an automatic renewal provision, then this letter shall also serve as notice of our election, as evidenced by this letter, to terminate that agreement at the end of its current term, and it will be necessary for the affected cable system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,

A handwritten signature in black ink, appearing to read "David Praga", written over a horizontal line.

David Praga
General Manager
KIMA/KEPR/KLEW

Enclosure

cc: Public File



2011 CABLE RETRANSMISSION CONSENT ELECTION STATEMENT
FOR STATION KLEW-TV

This Statement constitutes the election, pursuant to Section 76.64 of the Rules of the Federal Communications Commission, by Fisher Broadcasting-Washington TV, L.L.C., licensee of Station KLEW-TV, LEWISTON, ID (the "Station"), to require CHARTER COMM-OKANOGAN to obtain the Station's consent beginning January 1, 2012, for retransmission of its broadcast signal by, but not limited to, the cable system(s) serving the following community(ies) and county(ies), and any unincorporated areas within these community(ies) and county(ies):

OMAK, OKANOGAN COUNTY, WA

This election is effective for the period beginning January 1, 2012, and terminating as of December 31, 2014.

This will certify that this Statement was placed in the Station's local public file on September 26, 2011 and mailed by certified mail, return receipt requested, on September 26, 2011 to the following cable system(s):

LINDA KIMBERLY
REGIONAL GENERAL MANAGER
CHARTER COMM-OKANOGAN
222 NE PARK PLAZA DR STE 23
VANCOUVER , WA 98684

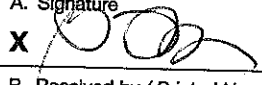
Station: KLEW-TV

Date: September 26, 2011

By:

A handwritten signature in black ink, appearing to read "David Praga", written over a horizontal line.

David Praga
General Manager
KIMA/KEPR/KLEW

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature X  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>LINDA KIMBERLY REGIONAL GENERAL MANAGER CHARTER COMM-OKANOGAN 222 NE PARK PLAZA DR STE 23 VANCOUVER, WA 98684</p>		<p>B. Received by (Printed Name) E. Sousa</p>	<p>C. Date of Delivery 9-28-11</p>
<p>2. Article Number (Transfer from service label)</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>PS Form 3811, February 2004</p>		<p>Domestic Return Receipt</p>	

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	
<p>Sent To LINDA KIMBERLY</p> <p>Street, Apt. No., or PO Box No. REGIONAL GENERAL MANAGER CHARTER COMM-OKANOGAN 222 NE PARK PLAZA DR STE 23 City, State, ZIP+4 VANCOUVER, WA 98684</p>	
<p>PS Form 3800, August 2006</p> <p>See Reverse for Instructions</p>	

UNITED STATES POSTAL SERVICE

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

20 SEP 2011 PM 6

- Sender: Please print your name, address, and ZIP+4 in this box •

KIRSTEN HASTINGS
FISHER COMMUNICATIONS
140 4TH AVE N, STE 500
SEATTLE, WA 98109

Certified Mail Provides:

- A mailing receipt
- A unique identifier for your mailpiece
- A record of delivery kept by the Postal Service for two years

Important Reminders:

- Certified Mail may **ONLY** be combined with First-Class Mail® or Priority Mail®.
- Certified Mail is **not** available for any class of international mail.
- **NO INSURANCE COVERAGE IS PROVIDED** with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a *Return Receipt* may be requested to provide proof of delivery. To obtain *Return Receipt* service, please complete and attach a *Return Receipt* (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS® postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "Restricted Delivery".
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IMPORTANT: Save this receipt and present it when making an inquiry.

PS Form 3800, August 2006 (Reverse) PSN 7530-02-000-9047



September 26, 2011

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RETURN RECEIPT REQUESTED**

**LINDA KIMBERLY
REGIONAL GENERAL MANAGER
CHARTER COMMUNICATIONS
222 NE PARK PLAZA DR STE 23
VANCOUVER , WA 98684**

Re: 2011 Three-Year Election for Retransmission Consent

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Sincerely,

A handwritten signature in black ink, appearing to be "David Praga", written over a horizontal line.

David Praga
General Manager
KIMA/KEPR/KLEW

Enclosure

cc: Public File



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FOR STATION KLEW-TV

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OROVILLE, OKANOGAN COUNTY, WA

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LINDA KIMBERLY
REGIONAL GENERAL MANAGER
CHARTER COMMUNICATIONS
222 NE PARK PLAZA DR STE 23
VANCOUVER , WA 98684

Station: KLEW-TV

Date: September 26, 2011

By:

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David Praga
General Manager
KIMA/KEPR/KLEW



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Sincerely,

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David Praga
General Manager
KIMA/KEPR/KLEW

Enclosure

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FOR STATION KLEW-TV

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COLVILLE, FERRY COUNTY, WA

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LINDA KIMBERLY
REGIONAL GENERAL MANAGER
CHARTER COMMUNICATIONS
222 NE PARK PLAZA DR STE 23
VANCOUVER , WA 98684

Station: KLEW-TV

Date: September 26, 2011

By:

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David Praga
General Manager
KIMA/KEPR/KLEW

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

LINDA KIMBERLY
REGIONAL GENERAL MANAGER
CHARTER COMMUNICATIONS
222 NE PARK PLAZA DR STE 23
VANCOUVER , WA 98684

COMPLETE THIS SECTION ON DELIVERY

A: Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

Article Number

(Transfer from service label)

7011 1570 0003 2340 9111

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	

Postmark
 Here
 Colville -
 Stephens Co.

Sent To **LINDA KIMBERLY**
REGIONAL GENERAL MANAGER
CHARTER COMMUNICATIONS
 Street, Apt. No.,
 or PO Box No. **222 NE PARK PLAZA DR STE 23**
 City, State, Zip **VANCOUVER , WA 98684**

PS Form 3800, August 2006 See Reverse for Instructions

UNITED STATES POSTAL SERVICE

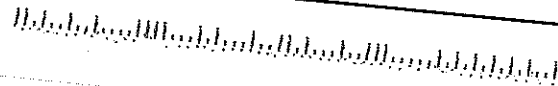


First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

KIRSTEN HASTINGS
FISHER COMMUNICATIONS
140 4TH AVE N, STE 500
SEATTLE, WA 98109

98109-4540



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REGIONAL GENERAL MANAGER
CHARTER COMMUNICATIONS
222 NE PARK PLAZA DR STE 23
VANCOUVER , WA 98684**

Re: 2011 Three-Year Election for Retransmission Consent

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Sincerely,

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David Praga
General Manager
KIMA/KEPR/KLEW

Enclosure

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COLVILLE, STEVENS COUNTY, WA

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REGIONAL GENERAL MANAGER
CHARTER COMMUNICATIONS
222 NE PARK PLAZA DR STE 23
VANCOUVER , WA 98684

Station: KLEW-TV

Date: September 26, 2011

By:

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David Praga
General Manager
KIMA/KEPR/KLEW



September 26, 2011

**VIA CERTIFIED MAIL
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REGIONAL GENERAL MANAGER
CHARTER COMMUNICATIONS
222 NE PARK PLAZA DR STE 23
WENATCHEE , WA 98684**

Re: 2011 Three-Year Election for Retransmission Consent

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ELMER CITY, GRANT COUNTY, WA

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CHARTER COMMUNICATIONS
222 NE PARK PLAZA DR STE 23
WENATCHEE , WA 98684

Station: KLEW-TV

Date: September 26, 2011

By:

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General Manager
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222 NE PARK PLAZA DR STE 23
WENATCHEE, WA 98684**

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

7011 1570 0003 2340 9128

102595-02-M-1540

Domestic Return Receipt

U.S. Postal Service™

CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

Postmark

Here
Elmer City -
Grant Co.

**LINDA KIMBERLY
REGIONAL GENERAL MANAGER
CHARTER COMMUNICATIONS**

**222 NE PARK PLAZA DR STE 23
WENATCHEE, WA 98684**

Sent To

Street, Apt. No.
or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

UNITED STATES POSTAL SERVICE

PORTLAND, OR 97201



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

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Sincerely,

A handwritten signature in dark ink, appearing to be "D. Praga", written over a horizontal line.

David Praga
General Manager
KIMA/KEPR/KLEW

Enclosure

cc: Public File



2011 CABLE RETRANSMISSION CONSENT ELECTION STATEMENT
FOR STATION KLEW-TV

This Statement constitutes the election, pursuant to Section 76.64 of the Rules of the Federal Communications Commission, by Fisher Broadcasting-Washington TV, L.L.C., licensee of Station KLEW-TV, LEWISTON, ID (the "Station"), to require CHARTER COMMUNICATIONS to obtain the Station's consent beginning January 1, 2012, for retransmission of its broadcast signal by, but not limited to, the cable system(s) serving the following community(ies) and county(ies), and any unincorporated areas within these community(ies) and county(ies):

ELMER CITY, OKANOGAN COUNTY, WA

This election is effective for the period beginning January 1, 2012, and terminating as of December 31, 2014.

This will certify that this Statement was placed in the Station's local public file on September 26, 2011 and mailed by certified mail, return receipt requested, on September 26, 2011 to the following cable system(s):

LINDA KIMBERLY
REGIONAL GENERAL MANAGER
CHARTER COMMUNICATIONS
222 NE PARK PLAZA DR STE 23
WENATCHEE , WA 98684

Station: KLEW-TV

Date: September 26, 2011

By:

A handwritten signature in black ink, appearing to read "David Praga", written over a horizontal line.

David Praga
General Manager
KIMA/KEPR/KLEW

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**LINDA KIMBERLY
REGIONAL GENERAL MANAGER
CHARTER COMMUNICATIONS
222 NE PARK PLAZA DR STE 23
WENATCHEE , WA 98684**

2. Article Number

(Transfer from service label)

7011 1570 0003 2340 9135

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X ☐ Agent☐ Addressee

B. Received by (Printed Name)

A. SCUSE

C. Date of Delivery

9-28-11

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

U.S. Postal Service™

CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$

Certified Fee

Return Receipt Fee
(Endorsement Required)Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees \$

LINDA KIMBERLY

REGIONAL GENERAL MANAGER

CHARTER COMMUNICATIONS

Sent to

Street, Apt. No., or PO Box No. 222 NE PARK PLAZA DR STE 23

City, State, ZIP+4 WENATCHEE , WA 98684

PS Form 3800, August 2006

See Reverse for Instructions

7011 1570 0003 2340 9135

Elmer City

Postmark
Here

Okanogan Co

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-16

20 SEP 2012

• Sender: Please print your name, address, and ZIP+4 in this box •

KIRSTEN HASTINGS
FISHER COMMUNICATIONS
140 4TH AVE N, STE 500
SEATTLE, WA 98109

Certified Mail Provides:

- A mailing receipt
- A unique identifier for your mailpiece
- A record of delivery kept by the Postal Service for two years

Important Reminders:

- Certified Mail may ONLY be combined with First-Class Mail® or Priority Mail®.
- Certified Mail is *not* available for any class of international mail.
- NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a *Return Receipt* may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS® postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "Restricted Delivery".
- If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: Save this receipt and present it when making an inquiry.

PS Form 3800, August 2006 (Reverse) PSN 7530-02-000-9047



September 26, 2011

**VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

**LINDA KIMBERLY
REGIONAL GENERAL MANAGER
CHARTER COMMUNICATIONS
222 NE PARK PLAZA DR STE 23
VANCOUVER , WA 98684**

Re: 2011 Three-Year Election for Retransmission Consent

Dear LINDA KIMBERLY,

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station KLEW-TV, LEWISTON, ID (the "Station") elects to require CHARTER COMMUNICATIONS, which serves the community(ies) and/or county(ies) and unincorporated areas within those community(ies) and county(ies) listed on the enclosed 2011 Cable Retransmission Consent Election Statement, to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2012, through December 31, 2014. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed Election Statement.

Fisher Communications will provide under separate cover a retransmission consent agreement to cover the election period of January 1, 2012 through December 31, 2014 to you shortly. If you already have a retransmission consent agreement with the Station or with Fisher Communications, Inc. or a subsidiary thereof that covers the Station for all or a portion of the January 1, 2012, through December 31, 2014, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2014, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if such an agreement contains an automatic renewal provision, then this letter shall also serve as notice of our election, as evidenced by this letter, to terminate that agreement at the end of its current term, and it will be necessary for the affected cable system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,

A handwritten signature in dark ink, appearing to be "D. Praga", written over a horizontal line.

David Praga
General Manager
KIMA/KEPR/KLEW

Enclosure

cc: Public File



2011 CABLE RETRANSMISSION CONSENT ELECTION STATEMENT
FOR STATION KLEW-TV

This Statement constitutes the election, pursuant to Section 76.64 of the Rules of the Federal Communications Commission, by Fisher Broadcasting-Washington TV, L.L.C., licensee of Station KLEW-TV, LEWISTON, ID (the "Station"), to require CHARTER COMMUNICATIONS to obtain the Station's consent beginning January 1, 2012, for retransmission of its broadcast signal by, but not limited to, the cable system(s) serving the following community(ies) and county(ies), and any unincorporated areas within these community(ies) and county(ies):

LOON LAKE, STEVENS COUNTY, WA

This election is effective for the period beginning January 1, 2012, and terminating as of December 31, 2014.

This will certify that this Statement was placed in the Station's local public file on September 26, 2011 and mailed by certified mail, return receipt requested, on September 26, 2011 to the following cable system(s):

LINDA KIMBERLY
REGIONAL GENERAL MANAGER
CHARTER COMMUNICATIONS
222 NE PARK PLAZA DR STE 23
VANCOUVER , WA 98684

Station: KLEW-TV

Date: September 26, 2011

By:

A handwritten signature in black ink, appearing to read "David Praga", written over a horizontal line.

David Praga
General Manager
KIMA/KEPR/KLEW

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

LINDA KIMBERLY
REGIONAL GENERAL MANAGER
CHARTER COMMUNICATIONS
222 NE PARK PLAZA DR STE 23
VANCOUVER , WA 98684

2. Article Number
(Transfer from service label)

7011 1570 0003 2340 9142

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent
☒ Addressee
- B. Received by (Printed Name) **g. SOUTH**
- C. Date of Delivery **9-28-11**
- D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)
- ☐
- Yes

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees \$

Postmark
Here

Loon Lake

LINDA KIMBERLY
REGIONAL GENERAL MANAGER

Sent To **CHARTER COMMUNICATIONS**
222 NE PARK PLAZA DR STE 23
VANCOUVER , WA 98684

PS Form 3800, August 2006

See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees \$

Postmark
Here

Orville

LINDA KIMBERLY

Sent To **REGIONAL GENERAL MANAGER**
CHARTER COMMUNICATIONS
222 NE PARK PLAZA DR STE 23
VANCOUVER , WA 98684

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

LINDA KIMBERLY
REGIONAL GENERAL MANAGER
CHARTER COMMUNICATIONS
222 NE PARK PLAZA DR STE 23
VANCOUVER , WA 98684

2. Article Number
(Transfer from service label)

7011 1570 0003 2340 9159

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent
☒ Addressee
- B. Received by (Printed Name) **g. SOUTH**
- C. Date of Delivery **9-28-11**
- D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)
- ☐
- Yes